V022,1020.1

CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY TYPE OR SMALL ENTITY (Column 2) (Column 1) FEE: RATE TOTAL CLAIMS RATE FEE 53 ASIC FEE 710.00 BASIC FEE 355,00 MAKRER FLED HUNGER EXTRA OR FOR X\$18= TOTAL CHARGEABLE CLAIMS 7 minus 20= 33 X\$ 9= カタフ OR 1 minus 3 = X80-BADEPENDENT CLARAS X40-40 OR MARTIPLE DEPENDENT CLAIM PRESENT +270= +135= OR "If the difference in column 1 is less than zero, enter "O" in column 2 692 TOTAL TOTAL OR OTHER THAN CLAIMS AS AMENDED - PART II . SMALL ENTITY SMALL ENTITY OR (Column 2) (Cotumn 3) (Column 1) ADDL 110 CLAUS ADOI-MEMBER PRESENT YES REMAINING TIONAL TIONAL PATE PATE PREVIOUSLY EXTRA AFTER FEE FEE PAID FOR MENDMENT X\$18= .. 5 X\$ 9= Miran OR Total XX X 4 Mirus Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLASM +135-OA TOW TOTAL OR ADDIT. FEE ADDIT, FEE (Column 3) (Column 1) (Column 2) •ริสิทธิรั ADDI-ADOI-PRESENT MARKER REMAINING TIONAL TIONAL RATE RATE PREVIOUSLY DOTRA AFTER FEE FEE PAID FOR MENDMEN 53 X\$ 9= X\$18-All run OR Total 2 86 Minus Independent X80-OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR TOTAL OR ADDIT. FEE ADDIT. FEE 4/8/05 (Cotumn 2) RIGHEST (Cotumn 3) (Column 1) COUNTS ADDI ADOI-NUMBER PREVIOUSLY **DOFSENT** TIONAL REMAINING DEPADMENT C TIONAL RATE RATE EXTRA AFTER FEE FEE PAID FOR AMENDMENT X\$18-X\$ 9-OR Total Minus X80-X40-OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR * If the entry in column 1 to tens than the entry in column 2, write "O" in column 3.

" If the "Highest Humber Previously Paid For" IN THIS SPACE to tess than 20, order "20."

"If the "Highest Humber Previously Paid For" IN THIS SPACE to less than 3, order "2."

The "Highest Humber Previously Paid For" In an artifular indent() to the highest number. 1077 OR ADDIT FEE ADOIT, FEE und in the appropriate book in column 1.

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									1	OTHER	THAN
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	SMALL	
	FOR	NUMBER	NUMBER FILED NUMBER			RATE		FEE		RATE	FEE
BASIC (37 CF								s	OR		<u>\$</u>
TOTAL	CLAIMS R 1.16(c))		minus 20 = 4			x \$	=		OR	× \$=	
INDEP	ENDENT CLAIMS		minus '3			× \$	=		OR	x \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ s	п		OR	+ \$=			
* If the difference in column 1 is less than zero, enter *0* in column 2.						TOTAL	-		OR	TOTAL	
11 (11)		AIMS AS AME							_		
^			NOED -		(a. a)	01.41			or	OTHER	
- 7	1-6-05	(Column 1)		(Column 2) HIGHEST	(Column 3)	SMA	LL Ł	NTITY	1	. SMALL	
NT A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	25	Minus	" 53	*	× \$	_=_		OR	x \$=	
AMENDMENT	Independent (37 CFR 1.16(b))	10	Minus	6	"	× s	=		OR	x \$=	
. ₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ s	=_		OR	+\$=	
						TOTAL ADD'L F	EE		OR	TOTAL ADD'L FEE	
	(Column 1) (Column 2) (Column 3)								_		
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	=	× s	_=		OR	× s=	
ΑĀ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ s	=		OR	+ \$=		
						TOTAL ADD'L F	ΕE		OR	TOTAL ADD'L FEE	
		(Column 1)	T	(Column 2)	(Column 3)	1			٦		
υ L		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL - FEE
ME	Total (37 CFR 1.16(c))	6	Minus	**	=	x s	_=		OR	x \$=	
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	•••	=	x s	_=		OR	x \$=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ s	_=		OR	+ s=	
						TOTAL ADD'L			OR	TOTAL ADD'L FEE	
1	" If the "Highest	olumn 1 is less Ih Number Previous Number Previousl	ly Paid For	" IN THIS SPACI	E is less than 20 Fie less than 3	, enter "20". enter "3"					

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.